Application or Docket Number									
7	SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY					
	RATE	FEE		RATE	FEE				
ĺ	BASIC FEE	385.00	OR	BASIC FEE	770.00				
	X\$ 9=	756	OR	X\$18=	100 C				
	X43=	215	OR	X86=	' , , , –				
	+145=		OR	+290=					
	TOTAL	135%	OR	TOTAL					
	SMALL		OR	OTHER THAN					
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	X\$ 9=		OR	X\$18=					
	X43=		OR	X86=					
ļ	+145=		OR	+290=					
	TOTAL		OR	TOTAL ADDIT. FEE					
	ADDIT. FEE			AUUII. FEE					
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	X\$ 9=		OR	X\$18=					
	X43=		OR	X86=					
	+145=		OR	+290=	•				
_									
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	X\$`9=		OR	X\$18=					
ll	.V42-			V06-					

## PATENT APPLICATION FEE DETERMINATION RECO

Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI TYPE	- EN	ITITY	OR	OTHER SMALL	
TOTAL CLAIMS			104 1				RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			04 minus 20= *		* 84		X\$ 9	)=	756	OR	X\$18=	100
INDEPENDENT CLAIMS			8 minus 3 = *5		*5		X43	=	215	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT						+145	=	, , ,	OR	+290=	, ,	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	۱L	13576	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)		(Colum		(Column 3)	SMAI	LLE	NTITY	OR I	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MCN	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
ME	Independent	endent * Minus ***				=	X43=			OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145				+290=	
11 9, 38 67, 94 (95, 94, 92,							TO1	_		OR	TOTAL	
ADDIT. FEEOR ADDIT. FEE												
r-		(Column 1) CLAIMS		(Colum	ST	(Column 3)	<u></u>	_	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		= .	X\$ 9:	-		OR	X\$18=	
	Independent	*	Minus	***		=	X43=	1		OR	X86=	
L.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+290=	
								AL	i	OR	TOTAL ADDIT. FEE	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X43=	1			X86=	
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM			-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	;
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												